

m/045/019

RE

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address.      2. ☐ Restricted Delivery.

3. Article Addressed to:

MR William MOELLER  
AMERICAN CONSOLIDATED  
55 South 100 East  
Pleasant Grove, Utah  
80462

4. Article Number

001 717 581

Type of Service:

- ☐ Registered      ☐ Insured  
☒ Certified      ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

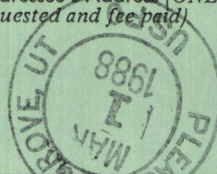
X *W. Moeller*

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

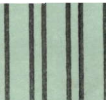


**UNITED STATES POSTAL SERVICE**  
**OFFICIAL BUSINESS**

**SENDER INSTRUCTIONS**

Print your name, address, and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE  
USE, \$300

**RETURN  
TO**



Print Sender's name, address, and ZIP Code in the space below.

STATE OF UTAH  
NATURAL RESOURCES  
OIL, GAS, & MINING  
3 TRIAD CENTER, SUITE 350  
SALT LAKE CITY, UTAH 84180-1203

P 001 71 581

## RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to *MR. WILLIAM MOELLER*  
*AMERICAN CONSOLIDATED*Street and No. *405 SOUTH 100 EAST*P.O., State and ZIP Code  
*PLEASANT GROVE, UTAH*Postage \$ *80462*

Certified Fee

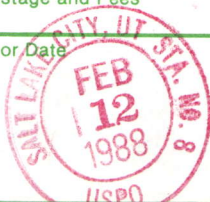
Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing  
to whom and Date DeliveredReturn receipt showing to whom,  
Date, and Address of Delivery

TOTAL Postage and Fees \$

Postmark or Date



★ U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

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m/045/019

**STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST-CLASS POSTAGE,  
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)**

1. If you want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)
2. If you do not want this receipt postmarked, stick the gummed stub on the left portion of the address side of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article. **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.